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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/964,037
	Filing Date	09/26/2001
	First Named Inventor	Jerry A. Whatley
	Art Unit	3627
	Examiner Name	James A. Kramer
Total Number of Pages in This Submission	Attorney Docket Number	BRKS-25,885

ENCLOSURES (Check all that apply)		
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Firm or Individual name	HOWISON & ARNOTT, L.L.P. John J. Arnott, Reg. No. 39,095
Signature	<i>John J. Arnott</i>
Date	1/5/2005

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
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PTO/SB/93 (09-03)

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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
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CORRESPONDENCE ADDRESS**

Application Number 09/064,097

Filing Date 09/28/2001

First Named Inventor Jerry A. Whalley

Art Unit 3627

Examiner Name James A. Kraemer

Attorney Docket Number BRKS-25,885

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

☒ all the attorneys/agents of record.☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or☐ the attorneys/agents associated with Customer Number**NOTE:** This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The inventors/owners of the application are unresponsive to our diligent attempts to contact them regarding this application. They do not answer certified mail, and their phone numbers are non-working or unlisted. In addition, client owes over \$12,000.00 in legal fees and has made no attempt to pay in the last 3 years. At the time of submission of this Request, applicant has 3 months until the expiration date of a time period for response or possible extension period.

The reasons for this request are:

CORRESPONDENCE ADDRESS1. ☐ The correspondence address is NOT affected by this withdrawal.2. ☒ Change the correspondence address and direct all future correspondence to:☐ Customer Number:**OR**☒ Firm or Individual Name Paul David Whalley

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972-479-0462

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